

## CHAPTER 3 SECTION 5.6

### THERAPEUTIC APHERESIS

Issue Date: December 29, 1982

Authority: [32 CFR 199.4\(d\)\(1\)](#)

---

#### I. PROCEDURE CODE

**36520**

#### II. DESCRIPTION

Any procedure in which blood is withdrawn from a donor, a portion (plasma, leukocytes, platelets, etc.) is separated and retained, and the remainder is retransfused into the donor.

#### III. POLICY

Therapeutic apheresis **may be cost-shared when medically necessary and the standard of medical practice. Outlined below are some examples of conditions for which therapeutic apheresis is indicated:**

1. Myasthenia gravis during a life-threatening crisis;
2. Goodpasture's Syndrome.
3. Life-threatening immune complex rheumatoid vasculitis;
4. Multiple myeloma (**symptomatic monoclonal gammopathy**).
5. Waldenstrom's macroglobulinemia.
6. Hypergammaglobulinemia purpura.
7. Cryoglobulinemia.
8. Thrombotic thrombocytopenic purpura.
9. Guillain-Barre syndrome.
10. Membranous and proliferative nephritis (glomerulonephritis).
11. Chronic myelogenous leukemia.

12. Chronic inflammatory demyelinating polyneuropathy.

13. Familial hypercholesterolemia. The device must be FDA approved and used only in accordance with FDA labeling.

14. Leukapheresis in the treatment of leukemia.

15. Hemolytic uremic syndrome (HUS).

16. Hyperviscosity syndromes.

17. Homozygous familial hypercholesterolemia.

18. Post-transfusion purpura.

19. Refsum's disease.

#### IV. POLICY CONSIDERATIONS

A. **Therapeutic apheresis** should be used only after conventional forms of treatment have been tried and have proven ineffective in life-threatening situations.

B. In some life-threatening situations, it may not be possible to have used conventional forms of treatment prior to the use of **therapeutic apheresis**. In these cases, conventional forms of treatment may be used in conjunction with **therapeutic apheresis**.

- END -